

With that, I yield the floor and suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

Mr. FRIST. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

BIPARTISAN MEDICARE REFORM BILL

Mr. FRIST. Mr. President, before we left for the Fourth of July recess, we passed historic legislation to improve Medicare, to strengthen Medicare, and to offer for the first time a prescription drug benefit through the Medicare Program for our seniors and individuals with disabilities. We worked hard in that endeavor to produce a bipartisan consensus, working together on both sides of the aisle, with this common mission, this common goal, and we succeeded.

We were successful in passing a bipartisan bill that for the first time since 1965, in the history of Medicare, offers access to this new prescription drug benefit, and at the same time reforms, modernizes, and strengthens Medicare in a very significant way. Both individuals with disabilities and seniors collectively, 40 million people, will have health care coverage that in the future will be responsive to their needs in order to achieve that goal of health care security after the age of 65 or, if you are an individual with a disability, in the near future.

It is responsive to them directly but also in a way that will allow the Medicare Program to take advantage of the great innovations in technology, in new prescription drugs that can make people's lives better, which will improve the quality of life.

I mentioned the fact that this was bipartisan legislation. I think it is important that we showed a spirit of cooperation in taking on an issue many people in the United States thought would be too partisan and too political. We addressed it in a bipartisan fashion with the leadership of Chairman GRASSLEY and Senator BAUCUS in a way that was reasoned, showed common sense, and that accomplished that goal of significant modernization while at the same time adding a new benefit. We identified the issue. We tackled it head on, and we delivered a bill that reflected the priorities of both sides of the aisle.

That demonstrated to me, and I think to the American people, that even in a very evenly, closely divided Senate, if we share a common goal we can indeed move America forward on issues that are important to the American people.

Coming back from recess, we will very shortly begin the conference where once again both sides of the aisle will work together, the Senate and the

House, to fashion a final product that will be a resolution of the differences between that House and Senate bill. I am confident in that process we will have the same resolve and determination in meeting that goal, that we will be able to bridge those differences, and develop a strong bill that can be supported in a bipartisan way and signed by the President of the United States. Both Chambers are committed to accomplishing this, to doing it right, and to getting it done.

PRESIDENTIAL TRIP TO AFRICA

I do want to comment on the President's trip to Africa. I commend President Bush for his bold leadership and his personal, as well as governmental—meaning the Senate, the House, and the executive branch—commitment to the pressing needs of Africa. President Bush will be leaving this afternoon for Africa to see firsthand the opportunities, and indeed the challenges, that exist on that continent.

Approximately once a year I have had the opportunity, since being in the Senate, to go to that continent, to a range of countries, several of which he will be going to. The countries I usually go to are the Sudan, Kenya, Tanzania, and Uganda. He will visit a range of other countries.

I think it is important for members of the executive branch as well as Members of this body and the House of Representatives to go firsthand and see the ravages that occur as a product of this little virus, HIV/AIDS, to see the impact of malaria, to see the impact of resistant tuberculosis and, at the same time, to look at the issues that surround the security of those nations as well as international security.

The President's trip will highlight a positive, substantive agenda that the administration has put on the table. Part of that agenda and vision is this AIDS initiative which we addressed in the Senate a little over a month ago, a 5-year, \$15 billion commitment that this body passed and was ultimately signed by the President. This global HIV/AIDS initiative is the largest international public health initiative on a single disease, a single entity, in the history of this country.

I look forward to taking a delegation of U.S. Senators to Africa sometime in August—next month—to advance our collective effort in this regard.

As I mentioned earlier in opening the Senate, we have a very challenging month ahead with medical liability, with energy, with the appropriations process, which will be well underway in a few days, with the judicial nominees, with State Department authorization. There is a lot to accomplish. I am confident we can meet the goals I set out this afternoon. I look forward to working with my colleagues to make this one of the most productive sessions thus far.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

Mr. FRIST. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER (Mr. ROBERTS). Without objection, it is so ordered.

PATIENTS FIRST ACT OF 2003— MOTION TO PROCEED

Mr. FRIST. Mr. President, I ask unanimous consent that the Senate now proceed to the consideration of Calendar No. 186, S. 11, the Patients First Act of 2003.

The PRESIDING OFFICER. Is there objection?

Mr. DURBIN. Mr. President, I object. The PRESIDING OFFICER. Objection is heard.

Mr. FRIST. Mr. President, with that objection, I now move to proceed to S. 11. I understand that Members on the other side of the aisle are prepared to debate the motion itself. The majority whip, Senator MCCONNELL, is prepared to open our debate on this issue as well.

It would be my intent later today to file a cloture motion on the motion to proceed to this medical liabilities reform bill. This vote would then occur on Wednesday of this week. I look forward to the very important debate on this truly national crisis, and I encourage Members who want to speak to come to the floor today. We will be debating this legislation today as well as tomorrow. We encourage Members to come to the floor today.

I yield the floor.

The PRESIDING OFFICER. The distinguished Senator from Kentucky is recognized.

Mr. MCCONNELL. Mr. President, there is perhaps no more vexing challenge confronting this Congress than improving the quality and affordability of health care for all our citizens.

Just a few weeks ago, this Senate took historic action to strengthen and modernize Medicare by providing seniors new choices and adding a prescription drug benefit. During the past year, this Senate passed legislation to provide new resources to the scientists at the National Institutes of Health and to strengthen our Nation's defenses against the threat of bioterrorism.

While we shouldn't minimize the importance of these initiatives, the Senate has not addressed one of the most fundamental problems limiting American access to quality health care; that is, reforming our Nation's flawed medical liability system.

Our current medical liability system encourages excessive litigation, drives up costs, and is literally scaring doctors out of the medical profession. All too often, these lawsuits result in exorbitant judgments that benefit personal injury lawyers more than they compensate injured patients. I am pleased that the Senate will soon consider legislation, the Patients First Act, authored by Senator ENSIGN, to address many of these shortcomings.